

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		8.3.00
O.I.P.E. CLASSIFIER		48	8/2/00
FORMALITY REVIEW	L	7353	9-13-00
RESPONSE FORMALITY REVIEW		71476	10/14/00

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                        I ..... Interference  
 - (Through numeral) ..... Canceled    A ..... Appeal  
 + ..... Restricted                        O ..... Objected

Claim	Original / Date	Final / Date	Original / Date	Final / Date
1	✓	✓		
2	✓	✓		
3	✓	✓		
4	✓	✓		
5	✓	✓		
6	✓	✓		
7	✓	✓		
8	✓	✓		
9	✓	✓		
10	✓	✓		
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45	✓	✓		
46	✓	✓		
47	✓	✓		
48	✓	✓		
49	✓	✓		
50	✓	✓		

Claim	Original / Date	Final / Date
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Claim	Original / Date	Final / Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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